

Mission

To provide early intervention services for infants and toddlers who have been identified as having a developmental delay, a diagnosis with a high probability of a developmental delay and/or atypical development to promote their overall development and community integration.

Focus

Early Intervention Services supports the Infant and Toddler Connection (ITC), a state program that provides federally mandated early intervention services to infants and toddlers as outlined in Part C of the Individuals with Disabilities Education Act (IDEA). ITC provides physical, speech and occupational therapy, as well as special instruction to children ages birth to 3 years who need extra help with sitting, crawling, walking and/or talking. These services are also provided to children with specific disabilities such as autism, Down syndrome and spina bifida. Through a public/private partnership, which increases access to trained professionals in the local community, ITC provides federally-mandated services including, but not limited to: occupational and speech therapy; special instruction; medical, health and nursing services; hearing and vision services; assistive technology (e.g., hearing aids, walkers and mobility aids); family training and counseling; nutrition; service coordination; and transportation. A local coordinating council, known as the Fairfax Interagency Coordinating Council, serves as the mandatory leadership and oversight body, while the CSB serves as the fiscal agent. It should be noted that the demand for early intervention services is anticipated to increase since the program has experienced significant growth in the last few years. From FY 2000 to FY 2004, for example, the number of children admitted for ITC services increased from 531 to 808, an average annual growth rate of 11.1 percent. When evaluations are included as well, the total number of children served between FY 2000 to FY 2004 increased from 933 to 1,434, or 11.3 percent per year.

New Initiatives and Recent Accomplishments in Support of the Fairfax County Vision

Maintaining Safe and Caring Communities	Recent	FY 2006	Cost
	Success	Initiative	Center
Continue to support a forum for public and private service providers to foster professional development and improve service delivery. Recent successes include hosting quarterly provider forums that were attended by all service delivery staff.	Q		Agencywide

Maintaining Safe and Caring Communities	Recent Success	FY 2006 Initiative	Cost Center
Continue to provide high-quality and timely evaluation, case management, delivery of services, and service coordination to a growing number of Medicaid families. As of January 2004, Medicaid reimbursement rates have made home visits for new Medicaid families cost prohibitive for private providers who are not employed by a CSB. ITC therapeutic staff are now the only providers of these services for all new children with Medicaid across the County.	¥	ð	Agencywide
Continue strengthening outreach and support efforts by expanding collaborations with the Fairfax County Health Department, INOVA Fairfax Hospital and Fairfax County Public Schools to ensure that infants and toddlers get appropriate services as soon as delays are detected.	lacktriangle	lacksquare	Agencywide
Collaborate with Fairfax County Public Schools' Bright Beginnings for Babies program to increase access to specialized hearing and vision services.	\blacksquare	v	Agencywide
Continue to address the growing cultural diversity needs of families requiring ITC services across the County by maintaining a list of 33 interpreters who are fluent in 10 languages, including Spanish, Urdu, Mandarin Chinese, Korean and American Sign Language.	¥	✓	Agencywide
Connecting People and Places	Recent Success	FY 2006 Initiative	Cost Center
Maintain and expand an assistive technology loan program to increase access and maximize resources for the CSB community. Recent successes include two staff members receiving certification as specialists in assistive technology services and equipment, and receipt of over \$10,000 in grants to assist in the growth and maintenance of the assistive technology loan program (with a focus on augmentative communication devices).	A		Agencywide
Continue to develop standards to improve service coordination, timely delivery of services and family satisfaction.	\blacksquare	V	Agencywide
Exercising Corporate Stewardship	Recent Success	FY 2006 Initiative	Cost Center
Expand and restructure public/private partnerships to maximize reimbursement from third-party insurance providers and Medicaid, as well as to ensure that services are delivered in a timely manner to all eligible families.		V	Agencywide

Exercising Corporate Stewardship	Recent	FY 2006	Cost
	Success	Initiative	Center
Currently assessing the feasibility of a web-based patient data chart that will allow for Health Insurance Portability and Accountability Act (HIPAA) compliance, and more effective and efficient patient service by clinicians and therapists in the field.			Agencywide

Budget and Staff Resources¹ ★ 🛱

Agency Summary						
Category	FY 2004 Actual	FY 2005 Adopted Budget Plan	FY 2005 Revised Budget Plan	FY 2006 Advertised Budget Plan	FY 2006 Adopted Budget Plan	
Authorized Positions/Staff Years						
Regular	20/ 20	20/ 20	20/ 20	20/ 20	20/ 20	
Grant	11/ 10.5	11/ 10.5	11/ 11	11/ 11	11/ 11	
Expenditures:						
Personnel Services	\$1,997,834	\$2,080,887	\$2,360,391	\$2,161,131	\$2,161,131	
Operating Expenses	1,720,118	1,598,212	1,584,319	1,594,865	1,594,865	
Capital Equipment	0	0	0	0	0	
Total Expenditures	\$3,717,952	\$3,679,099	\$3,944,710	\$3,755,996	\$3,755,996	
Revenue:						
Fairfax County	\$2,384,602	\$2,337,512	\$2,337,512	\$2,436,403	\$2,436,403	
State DMHMRSAS	3,125	3,125	317,577	86,058	86,058	
Federal Other	992,565	992,565	880,834	853,709	853,709	
Medicaid Option	11,700	47,090	47,090	47,090	47,090	
Program/Client Fees	185,283	332,736	386,976	332,736	332,736	
Miscellaneous	52	0	0	0	0	
Fund Balance	140,625	(33,929)	(25,279)	0	0	
Total Revenue	\$3,717,952	\$3,679,099	\$3,944,710	\$3,755,996	\$3,755,996	

¹ Please note that this is a new agency beginning in FY 2005 and the historical funding is shown here for presentation purposes. Previously, the funding was included in Mental Retardation Services under Infant Toddler Connection and Early Intervention.

Program Management		Daytime Development Center		Service Coordination
MR Specialist V	1	MR Specialist III	1	MR Specialist III
MR Specialist III	3	MR Specialists II	2	MR Specialists II
MR Specialist I	2	Physical Therapists II		
Management Analyst I	2	Occupational Therapists II		Grant Positions
- ,	4	Speech Pathologists II	8	MR Specialists II
Grant Positions	1	Administrative Assistant II		
Administrative Assistant III				
		Grant Positions		
	2	Physical Therapists II		

Fund 106

Community Services Board (CSB) - Early Intervention Services

FY 2006 Funding Adjustments

The following funding adjustments from the FY 2005 Revised Budget Plan are necessary to support the FY 2006 program:

♦ Employee Compensation

\$104,684

An increase of \$104,684 in Personnel Services is associated with salary adjustments necessary to support the County's compensation program, an increase to the shift differential rate to \$0.85 for the evening shift and \$1.10 for the midnight shift, and an increase to holiday pay to compensate employees according to their actual holiday shift hours worked.

♦ Rate Increases \$28,136

A total increase of \$28,136 in Operating Expenses is due to \$20,136 for a 2.49 percent contract rate increase for providers of contracted early intervention services, and \$8,000 to increase the automobile mileage reimbursement rate to \$0.405 per mile.

♦ Grant Adjustments (\$27,125)

A decrease of \$27,125 is attributable to adjustments made to the Infant and Toddler Connection (ITC) Part C grant as a result of a revised grant award. In particular, a decrease of \$19,704 is reflected in Personnel Services and a decrease of \$7,421 is shown in Operating Expenses.

Board of Supervisors' Adjustments

The following funding adjustments reflect all changes to the <u>FY 2006 Advertised Budget Plan</u>, as approved by the Board of Supervisors on April 25, 2005:

♦ The Board of Supervisors made no adjustments to this fund.

Changes to <u>FY 2005 Adopted Budget Plan</u>

The following funding adjustments reflect all approved changes in the FY 2005 Revised Budget Plan since passage of the FY 2005 Adopted Budget Plan. Included are all adjustments made as part of the FY 2004 Carryover Review and all other approved changes through December 31, 2004:

♦ Carryover Adjustments

(\$28,798)

As part of the FY 2004 Carryover Review, a decrease of \$28,798, comprised of \$24,062 in Operating Expenses and \$4,736 in Personnel Services, is attributable to a revised grant award. As a result, a commensurate reduction in expenditures was made.

The following funding adjustments reflect all approved changes to the FY 2005 Revised Budget Plan from January 1, 2005 through April 18, 2005. Included are all adjustments made as part of the FY 2005 Third Quarter Review:

♦ Grant and State COLA Funding Adjustments

\$231,519

An increase of \$231,519 in expenditures is necessary to appropriate \$230,000 in anticipated revenue due to new state funding to Part C agencies that will be used to increase service coordination and social work services, purchase additional assistive technology equipment for ITC's lending closet, and increase service capacity for non-Medicaid children through private providers; and \$1,519 in increased revenue from the State General Fund for State COLA that will support additional therapeutic services.

♦ Position Adjustments

\$54,240

An increase of \$54,240, entirely offset by increased client fee revenue, is included to address workload issues

♦ Internal Funding Adjustment and Realignment Between CSB Agencies

\$8,650

An increase of \$8,650 in expenditures is due to funding adjustments and realignment between CSB agencies to reflect updated expenditure requirements for the remainder of FY 2005.

Key Performance Measures

Goal

To provide early intervention services to infants and toddlers with disabilities and their families to reduce or eliminate the effects of disabling conditions.

Objectives

♦ To complete evaluations and develop an Individualized Family Service Plan (IFSP) for 90 percent of families within 45 days from intake call.

	Prior Year Actuals			Current Estimate	Future Estimate
Indicator	FY 2002 Actual	FY 2003 Actual	FY 2004 Estimate/Actual	FY 2005	FY 2006
Output:					
Individuals served	1,189	1,254	1,300 / 1,434	1,593	1,770
Efficiency:					
Annual cost per individual served	\$1,102	\$1,004	\$1,135 / \$1,106	\$938	\$1,106
Service Quality:					
Percent of families who agreed that early intervention services made them feel more confident in meeting their child's needs	NA	NA	NA / NA	85%	85%
Outcome:					
Percent of families who received completed IFSP within 45 days of intake call	NA	NA	NA / NA	90%	90%

Performance Measurement Results

FY 2005 represented the first year that Early Intervention Services was reflected as an independent agency. Prior to FY 2005, Early Intervention Services was included under Mental Retardation Services. New performance indicators were developed in FY 2005 to more accurately assess program performance. Performance measurement data that were available for previous fiscal years are shown where possible, but service quality and outcome data are not available prior to FY 2005.

In FY 2004, 1,434 children and toddlers were served by Early Intervention Services, as compared to the goal of 1,300. This increase is reflective of the large and rapid growth in demand for early intervention services consistently seen over the past several years. This trend is expected to continue in the future. Actual annual cost per individual served was \$1,106 in FY 2004, slightly lower than the anticipated annual cost of \$1,135 per individual served.